

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION

Case No. 17-md-2804

Judge Dan Aaron

This document relates to: Polster

The County of Cuyahoga v. Purdue  
Pharma L.P., et al.

Case No. 18-OP-45090

City of Cleveland, Ohio v. Purdue  
Pharma L.P., et al

Case No. 18-OP-45132

The County of Summit, Ohio, et al.  
v. Purdue Pharma L.P., et al.

Case No. 17-OP-45004

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Volume III
Continued deposition of
JOHN PRINCE

May 23, 2019

1:04 p.m.

Taken at:
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Cleveland, Ohio

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1 MR. BLOCK: We're now about to begin
2 the continued deposition of Detective John
3 Prince, and all counsel that were present for
4 the continued depositions of Detectives Leonard
5 and Baker-Stella are still here, with the
6 exception of Mr. Ledlie, who has departed, and
7 Mr. Cluff is here.

8 Is there anybody new on the phone
9 that wasn't at the prior two depositions?

10 Then could you please swear the
11 witness?

12 JOHN PRINCE, of lawful age, called for
13 examination, as provided by the Federal Rules of
14 Civil Procedure, being by me first duly sworn,
15 as hereinafter certified, deposed and said as
16 follows:

17 EXAMINATION OF JOHN PRINCE

18 BY MR. BLOCK:

19 Q. Good afternoon, Detective Prince.

20 A. Good afternoon.

21 Q. How are you today?

22 A. Good. How are you doing?

23 Q. Fine. Thanks.

24 Did you do anything to prepare for
25 this portion of your deposition?

1 A. Yes.

2 Q. What did you do?

3 A. I had a meeting with counsel.

4 Q. Is that Mr. Cluff?

5 A. Yes.

6 Q. Anyone else?

7 A. Yes.

8 Q. Who else?

9 A. That would be --

10 Q. Mr. Bennett?

11 A. Yes, Mr. Bennett. That's it.

12 Q. Did you review the transcripts from
13 the prior installments of your deposition?

14 A. I reviewed them at the instruction
15 of counsel for any changes or mistakes, yes.

16 Q. I'm not aware of getting an errata
17 sheet. Did you see anything that you needed to
18 change or fix?

19 A. I did not.

20 Q. Have you talked to anyone about this
21 case in any way, shape or form other than
22 counsel since we last saw you?

23 A. Other than to say, again, that I was
24 having a deposition, they were having
25 depositions, and when, no.

1 Q. Who were the people you told you
2 were having this deposition?

3 A. My partner.

4 Q. And who is that?

5 A. Shelly Patena. I think I must have
6 talked to Ms. Baker-Stella and probably to
7 Patrick Leonard.

8 Q. Did either Detective Leonard or
9 Detective Baker-Stella say anything to you about
10 their depositions?

11 A. No, sir, other than they were
12 getting deposed also, if that counts.

13 Q. You didn't see transcripts of their
14 depositions?

15 A. No, sir.

16 Q. And Detective Patena -- did I
17 pronounce that correctly?

18 A. Correct.

19 Q. Is she a City of Cleveland -- who
20 does she work for?

21 A. Cleveland narcotics unit.

22 Q. Is she assigned to the TDS?

23 A. She is not.

24 Q. But she's still your partner?

25 A. At the Cleveland narcotics unit,

1 yes.

2 Q. How long has she been your partner?

3 A. Since 2012.

4 Q. And remind me again, the date you
5 started with the TDS was when?

6 A. January -- I'm not sure exactly what
7 the date was -- 2018, so just over a bit of a
8 year.

9 Q. And are you having fun so far on the
10 TDS?

11 MR. CLUFF: Objection. Vague.

12 A. I don't call it fun, no.

13 Q. Are you enjoying your work at the
14 TDS?

15 A. It has its moments.

16 Q. I take it that means both good
17 moments and bad moments?

18 A. That would be fair to say, yes.

19 Q. Are you looking to get off of the
20 TDS?

21 A. I am actually going to retire in
22 roughly 18 -- I'm sorry, eight months and maybe
23 22 days, or something like that.

24 Q. Not that you're counting.

25 A. No.

1 Q. That's to retire from both the TDS
2 and the City of Cleveland?

3 A. That's to retire from the City of
4 Cleveland, which is an automatic retirement with
5 TDS.

6 Q. And what's next for you?

7 A. I don't know yet.

8 Q. Why are you retiring?

9 A. I'm getting -- the easiest answer is
10 I'm getting timed out. I have to leave.

11 Q. And how many years -- or what's the
12 time limit that you're hitting?

13 MR. CLUFF: Objection. Compound.

14 A. I am in the DROP program. It's
15 fairly complicated, but the bottom line is that
16 I have a date that I must retire by, and that
17 will -- I will reach that in February of 2020.

18 Q. And so how many years will it be of
19 work for the force when you retire?

20 A. For the force it will be a total of
21 close to 30, and I have been in law enforcement
22 for -- I think I'm closing in on 36 or 37 years.

23 Q. Will you work at TDS up until the
24 day of your retirement or is someone going to
25 come in and replace you before then?

1 A. I don't know.

2 Q. Do you know if there's a search
3 underway for a replacement for you in terms of
4 the TDS assignment?

5 A. I don't know.

6 Q. Would you recommend it to Detective
7 Patena?

8 A. Under certain circumstances, yes.
9 Again, that's very complicated, that I can't
10 exactly -- wouldn't be fair to answer yes or no.

11 Q. What are some of the circumstances
12 that go into it?

13 A. One of the circumstances is that
14 she's the only remaining Cleveland diversion
15 detective, so that would leave a problem with
16 not having another diversion detective there, as
17 well as potentially the strains of her, which I
18 have had, of, you know, working for Cleveland as
19 well as my obligation to TDS.

20 Q. Do you think the City of Cleveland
21 should continue to assign someone to the TDS
22 after you depart?

23 A. Yes.

24 Q. And if someone were to ask you, you
25 know, whoever the person is, should I think

1 about taking the TDS assignment, what would you
2 say are the top -- the three best things about
3 working at the TDS? And I'm going to ask you
4 the three worst, just so you know where I'm
5 going here.

6 A. The additional resources, I think
7 you're working with a good group of people, and
8 the potential experience and other things that
9 you will learn or be exposed to.

10 Q. Did I paraphrase that correctly, it
11 might be a broader experience?

12 MR. CLUFF: Objection. Misstates
13 testimony.

14 A. I think what I'm trying to say is
15 you'll be exposed to a larger scope of law
16 enforcement.

17 Q. Let's get them on the table and then
18 I can go back. What would you say are the three
19 least -- three worst parts of the job or the
20 three factors that would be least --

21 A. Paperwork. We'll go with paperwork.
22 Why don't we try paperwork.

23 Q. That's all three? Anything else
24 besides paperwork?

25 A. The redundancy of paperwork.

1 Q. And anything else?

2 A. The fact that you're doing more
3 paperwork that you thought you already did.

4 SPECIAL MASTER COHEN: Let me
5 suggest you should not become an attorney when
6 you retire.

7 MR. BLOCK: By the way, Special
8 Master Cohen, did you introduce yourself to
9 Detective --

10 SPECIAL MASTER COHEN: I did. Thank
11 you for asking.

12 Q. But isn't there a Paperwork
13 Reduction Act?

14 MR. CLUFF: Objection. Calls for a
15 legal opinion.

16 A. I don't know.

17 Q. And I take it you do more paperwork
18 in your time at the TDS than you did prior to
19 joining TDS?

20 A. I'm doing paperwork for the City of
21 Cleveland as well as the responsibilities or the
22 paperwork that now is part of TDS.

23 Q. The additional resources that are a
24 plus, what did you have in mind by that? What
25 are the additional resources?

1 A. Funding.

2 Q. Anything else?

3 A. People.

4 Q. By that --

5 A. Additional agents, more -- you have
6 a group or a pool of people that can assist
7 you --

8 Q. Okay.

9 A. -- and -- run that back.

10 Q. You said additional resources was a
11 potential plus of joining the TDS for someone.

12 A. And equipment.

13 Q. What kinds of equipment?

14 MR. BENNETT: Objection. Scope.

15 You're not authorized to disclose
16 non-public law enforcement investigative
17 techniques, including the equipment used. To
18 the extent that there is equipment that is
19 publicly known and available, you may discuss
20 that equipment.

21 A. So the answer is they have
22 additional equipment.

23 Q. We'll come back to that.

24 When you say the people -- is that
25 because the TDS -- there are more people at the

1 TDS than there were at the City of Cleveland
2 narcotics unit?

3 MR. CLUFF: Objection. Vague.

4 Q. I'll try to ask it a different way.

5 I think you said one potential
6 downside for Detective Patena is if she went to
7 TDS, then there wouldn't be anyone at Cleveland
8 doing diversion investigations. Did I get that
9 right?

10 MR. CLUFF: Misstates testimony.

11 A. If she was to go to TDS, as things
12 are status quo, her and I are the only two
13 narcotics detectives who are assigned to
14 diversion or compliance enforcement, so with
15 assuming that I was already out of the picture,
16 that would just leave her, and then if she was
17 to go to TDS, then that would leave no detective
18 who has -- that would be assigned to diversion
19 or compliance.

20 Q. The work that you do for TDS today,
21 do you consider that to be diversion work?

22 A. Yes.

23 Q. Do you consider the work you do for
24 TDS to be compliance enforcement work?

25 A. If I may restate that. Compliance

1 and diversion to me are synonyms, they are the
2 same, potato potato (phonetic). It's the same
3 thing.

4 Q. So coming back to the people being
5 an additional resource, were you referring to
6 people other than the members of the TDS in your
7 answer? Do you remember telling me a pro of
8 going to TDS would be additional resources,
9 which would include people?

10 MR. CLUFF: Misstates testimony.

11 MR. BLOCK: No, it doesn't.

12 Q. I'm wondering by people were you
13 referring to people other than the ones
14 currently assigned to the TDS.

15 A. Yes, if needed, but the amount of
16 agents in TDS is -- I think you were asking
17 where the pluses are. That you had this larger
18 pool of agents, detectives to assist.

19 Q. In terms of funding, what do you
20 understand the difference in funding to be
21 between TDS versus City of Cleveland?

22 A. I work for the City of Cleveland. I
23 think if you look at our equipment, our cars and
24 things like that, it almost speaks for itself in
25 the sense that at times throughout my career

1 things have been very, very tight and have made
2 it difficult to do police work without, you
3 know, assisting in some ways, but TDS is funded
4 so that some of the difficulties that I
5 experienced as a Cleveland police officer aren't
6 there.

7 Q. What difficulties are you referring
8 to?

9 A. Equipment. The simplest thing.
10 Copy machines not working.

11 Q. It cuts down on the paperwork.

12 A. Yes, it does, but it doesn't stop
13 you from doing cases. You have to get creative.
14 Vehicles, vehicles for -- for fellow detectives.
15 Not getting into how we do things, but there are
16 certain protocols that you need certain things
17 to happen for certain types of investigations,
18 and that could be difficult at times.

19 Q. You said that I think a third plus
20 could be the exposure to a greater scope of law
21 enforcement, something close to that.

22 A. What I meant by that was the federal
23 laws and statutes and how they are enforced,
24 what -- a whole other, if you would, chapter in
25 law specifically related to diversion or

1 compliance.

2 Q. So are there types of diversion
3 cases that you've worked on at TDS that are new
4 to you, different from the types of cases you
5 worked on before you joined TDS?

6 A. Yes.

7 Q. And what types are we talking about
8 there?

9 MR. BENNETT: You can answer that.
10 General, not specific cases.

11 A. The types of cases I would say are
12 larger in scope, larger in the -- where the
13 locality is or multiple localities, and the type
14 of laws being enforced.

15 Q. And what do you mean by that second
16 part, the type of laws?

17 A. The more -- I would say regulatory
18 maybe in nature.

19 Q. Can you give an example of the type
20 of law you're referring to, not a specific case
21 but I'm trying to understand this a little more?

22 A. As a Cleveland detective, I was
23 guided by a few basic statutes that dealt
24 specifically with compliance. Almost all my
25 cases were within that. This has widened,

1 adding additional laws or things that come into
2 play as far as under the umbrella of what TDS
3 does.

4 Q. I want to talk a little bit about
5 the types of investigation, types and numbers of
6 investigations that you've worked on at TDS as a
7 TDS officer. Is that the right way to say it?
8 As someone assigned to TDS, okay? Do you
9 understand that's the scope of what we're
10 talking about?

11 A. So we're specifically talking about
12 only cases that I have worked on as a TFO, which
13 is a task force officer, for the TDS of DEA?

14 Q. Yes. As a TFO have you worked on
15 any investigations involving southern style pill
16 mills?

17 MR. CLUFF: Objection. Vague.

18 A. If you would, just so we're on the
19 same page, my interpretation of a southern
20 style -- I just want to make sure --

21 Q. I was trying to shortcut it from
22 your last deposition.

23 A. If we're using my definition from
24 the last --

25 Q. Yes.

1 A. Have I worked on any southern style,
2 I don't believe so.

3 Q. And as a TFO, have you worked on any
4 investigations involving other kind of pill
5 mills or the non-southern style pill mills?

6 MR. BENNETT: You can answer that
7 question yes or no.

8 A. Yes.

9 Q. How many?

10 A. Numerous. I'm not sure I can put a
11 number.

12 Q. How many -- please. Go ahead.

13 A. Understanding again, and this -- I
14 can repeat it, but I've only been there a year,
15 a little bit over a year, and obviously the
16 first part of that was trying to get me up to
17 some kind of working speed, so I've worked on
18 numerous, less than ten.

19 Q. And do you know how many
20 investigations have you worked on -- just
21 investigations total have you worked on as a TFO
22 in the year or so that you've been there?

23 MR. BENNETT: Objection. Vague.
24 You can answer.

25 A. How many investigations have I

1 worked on, assisted on, done anything with?

2 Q. Yes, done anything with.

3 A. I'm not sure. Again, it would be
4 numerous.

5 Q. Is it more than a dozen?

6 A. Yes.

7 Q. Is it more than two dozen?

8 A. I would say it's in that range.

9 Q. Okay. Is it more than three dozen?

10 A. No.

11 Q. So somewhere between two and three
12 dozen?

13 A. I think that's fair, yes.

14 Q. Have you worked on any -- and have
15 you worked on any investigations as a TFO into
16 improper prescribing?

17 MR. CLUFF: Objection. Vague.

18 A. Improper prescribing is?

19 Q. Well, do you have an understanding
20 of what you would consider an improper
21 prescribing investigation to be looking into?

22 A. Yes. I would call that trafficking.

23 Q. Okay.

24 A. If that's -- and are we talking
25 about a prescriber who was improperly

1 prescribing, because we also have groups that
2 are producing their own prescriptions and
3 prescribing -- you know, making -- is that
4 improper prescribing? It is to me.

5 Q. It's improper, that's fair. But
6 let's say a licensed medical professional who's
7 believed to be improperly prescribing
8 medications. Can we agree --

9 A. That's what we're talking about,
10 okay.

11 Q. Have you worked on any of those --
12 when I say "improper prescribing," that's what
13 I'll be talking about today.

14 A. You're talking about a doctor who is
15 potentially trafficking?

16 Q. Right.

17 A. The answer is yes.

18 Q. How many of those investigations
19 have you worked on as a TFO?

20 A. Numerous. I'm not quite sure. More
21 than four. It could be more than that. It is
22 more than four.

23 Q. Is it more than ten?

24 A. Probably not.

25 Q. If we can get the bracket, that's

1 great. That's what I'm trying to get at here.

2 And as a TFO, have you worked on any
3 cases involving forged prescriptions?

4 A. Yes.

5 Q. How many of those investigations?

6 A. Several.

7 Q. Less than four, less than a handful?

8 MR. BENNETT: Objection. Vague.

9 MR. BLOCK: A handful is five. I
10 don't think that's vague.

11 MR. BENNETT: Depends on how big
12 your hand is and the item you're holding.

13 Q. Is it less than five?

14 A. I'm thinking that it's probably more
15 than five.

16 Q. Less than ten?

17 A. Considering that I'm -- I think we
18 said I'm at a dozen, yeah. A lot of the cases
19 have multiple types of violations in them.

20 Q. Sure. So the numbers may overlap?

21 A. Yes. So I'm going to say yes.

22 Q. Have you worked on any
23 investigations as a TFO into potential doctor
24 shopping?

25 A. I don't believe so.

1 Q. How about in terms of -- and who
2 determines what investigations you work on as a
3 TFO?

4 A. My group supervisor ultimately
5 determines that or I speak with him.

6 Q. Is that Mr. Charters?

7 A. Yes.

8 Q. Has he been the group supervisor the
9 whole time?

10 A. Yes.

11 Q. And do you know how he determines
12 what cases he wants you to work on?

13 MR. CLUFF: Objection. Calls for
14 speculation.

15 A. No. I'm not sure.

16 Q. And as a TFO, have you worked on any
17 investigations where the investigation was into
18 a pharmacist?

19 MR. BENNETT: You can answer that
20 question yes or no only.

21 A. Yes.

22 Q. And how many of those kind of
23 investigations?

24 MR. BENNETT: You can answer with a
25 number if you can estimate.

1 A. Several.

2 Q. And are these investigations where
3 the suspicion is that a pharmacist is
4 stealing -- taking medication from the pharmacy
5 that he or she is not supposed to be?

6 MR. CLUFF: Objection.

7 Q. Or perhaps I can ask, what is the --
8 can you just -- generally, what's the form of
9 diversion that's suspected?

10 MR. BENNETT: Objection.

11 MR. CLUFF: Objection. Vague.

12 MR. BENNETT: And objection. Scope.

13 To the extent you can answer
14 generally the type of cases you investigate
15 involving pharmacists, you may. To the extent
16 that this requires you to give specific
17 information about ongoing investigations and
18 activities, you're not authorized to disclose.
19 So if you can answer generally the types of
20 cases you work, you may.

21 Regarding pharmacists is your
22 question, right, pharmacists?

23 MR. BLOCK: Yes.

24 A. Theft, and I think that's all I'm
25 allowed to answer.

1 Q. Have you worked on any
2 investigations where the focus of the
3 investigation was a pharmacy as a TFO?

4 MR. CLUFF: Objection. Vague.

5 Do you mean like the actual pharmacy
6 store or the pharmacy company?

7 Q. You can answer, Detective Prince.

8 A. Yes.

9 Q. How many of those?

10 MR. BENNETT: You can answer if you
11 know. If you know the number, you may answer
12 with a number, yes.

13 A. One.

14 Q. And have -- let's see. Have any of
15 the investigations that you've worked on as a
16 TFO resulted in an arrest?

17 MR. BENNETT: Objection. Scope.

18 To the extent that the arrest has
19 been made public and there are charges, you are
20 authorized to answer. To the extent that it's
21 an arrest that was not made public and the case
22 is still under investigation, you are not
23 authorized to answer.

24 MR. BLOCK: Special Master Cohen, I
25 think I should at least be able to get a yes or

1 no to that question without any limitation on
2 his scope.

3 SPECIAL MASTER COHEN: You can
4 answer yes or no, sir.

5 A. Yes.

6 Q. How many?

7 A. I'm so sorry. You just went too
8 fast. How many arrests --

9 Q. How many arrests have there been in
10 investigations that you've worked on as a TFO?

11 A. Boy, numerous.

12 Q. More than ten?

13 A. Yes.

14 Q. More than a hundred?

15 A. No.

16 Q. More than 20?

17 A. Yes.

18 Q. More than 50?

19 A. I don't think so.

20 Q. And have any of the investigations
21 that you've worked on as a TFO resulted in a
22 conviction?

23 A. Yes.

24 Q. How many?

25 A. Numerous.

1 Q. Please identify the names of any
2 individuals who have been convicted that you
3 worked on the investigation as a TFO.

4 MR. CLUFF: Objection. Lacks
5 foundation.

6 MR. BENNETT: You can answer.

7 A. Sabrina Miskiewicz, et al. I can't
8 remember the co-defendants. Part of the case is
9 still ongoing, so --

10 Q. I'm just asking for the names of the
11 folks that have been convicted, though.

12 A. Yes, but part of them have pled and
13 I don't know their names.

14 Q. I can only get what you know.

15 A. Yes. I can only give you what I
16 know. I don't know names. This is the -- it
17 was public. It was the promethazine --

18 Q. Was this a promethazine-codeine
19 ring?

20 A. Yes. That originated from the
21 Columbus area. My understanding is numerous
22 defendants have pled. My understanding, also,
23 is that several have not. And I don't
24 remember -- just can't remember their names.

25 Q. We'll come back to that one.

1 Other than the promethazine-codeine
2 ring convictions, are there any other
3 investigations that you've worked on that have
4 resulted in convictions?

5 A. The fentanyl from China
6 investigation.

7 Q. Do you remember who was convicted in
8 connection with that?

9 A. Yinn. I'm not sure.

10 MR. BENNETT: And I will interject
11 an objection on scope.

12 You are being asked not who's been
13 charged but who's actually been convicted, so it
14 does need to be convictions.

15 A. I can't remember anyone else.

16 Q. Sabrina Miskiewicz, what was she --
17 she?

18 A. Yes.

19 Q. What was she convicted for?

20 A. Prescription ring.

21 Q. Was that part of the
22 promethazine-codeine case or something
23 different?

24 A. Something different.

25 Q. Prescriptions of what?

1 MR. BENNETT: Objection. Scope.

2 You are authorized to disclose
3 public information about the case. To the
4 extent you have information that was not made
5 public, you're not authorized to disclose that
6 information. So if it's in the indictment, what
7 she was indicted for, you're authorized to
8 answer.

9 A. She was convicted of illegal
10 processing, deception to obtain dangerous drugs,
11 and trafficking.

12 Q. Was she a medical professional?

13 MR. CLUFF: Objection. Vague.

14 A. I believe that she worked for a
15 physician's office.

16 Q. Do you know what kinds of medication
17 she was trafficking? Well, was she trafficking
18 medications?

19 A. Yes.

20 Q. Do you know what kinds?

21 A. I believe Percocet and oxycodone.

22 Q. And how was she obtaining the
23 Percocet and oxycodone?

24 MR. BENNETT: Objection. Scope.
25 Same instructions.

1 A. She was creating prescriptions.

2 Q. Is that like a forgery case?

3 A. Part of that would be that, yes.

4 Q. And then arrested for trafficking,
5 so does that mean -- or convicted for
6 trafficking. Does that mean she was forging
7 scripts, getting them filled and then selling
8 the pills to other people or trying to at least?

9 MR. CLUFF: Objection. Compound.
10 Misstates testimony.

11 A. If we could go over -- the first
12 part was -- and I'll just answer yes or no.

13 Q. You said part of the conviction was
14 for trafficking, and I was just wondering does
15 that mean she was getting prescriptions filled
16 and then selling or trying to sell the pills to
17 others?

18 MR. CLUFF: Same objections.

19 A. She was forging the prescriptions.
20 She was orchestrating getting them filled. And
21 the rest isn't public record I'm assuming.

22 Q. Do you know, how long -- were you
23 the lead agent on -- were you the lead
24 investigator on the Miskiewicz case?

25 A. Yes.

1 Q. How long did that investigation
2 take?

3 A. I'm not quite sure, but I'm going to
4 say one to two years.

5 Q. Was that an investigation that was
6 ongoing when you started TDS and then you took
7 it over?

8 A. Yes.

9 Q. How about the [REDACTED]
10 ring? How long did that investigation take?

11 A. I'm not sure.

12 Q. Is part of it still ongoing?

13 A. It has not been fully litigated.

14 Q. So some people have been convicted
15 but there are others who they've been arrested
16 and they haven't been convicted yet or --

17 A. Yes. That's my understanding.

18 Q. And was that a case that was going
19 on when you -- was that an investigation that
20 was going on when you started at TDS?

21 A. I believe so.

22 Q. Were you the lead investigator on
23 that matter?

24 A. No.

25 Q. And where did -- I'm sorry that I'm

1 jumping around, but back to Ms. Miskiewicz.
2 Where was she from? Where was the doctor's
3 office? Let me back up.

4 Where was the doctor's office that
5 she worked at?

6 MR. BENNETT: You can answer that
7 question if it was publicly disclosed, which I
8 assume it would have to be to establish venue.

9 A. Parma.

10 Q. And do you know what type of
11 doctor's practice it was?

12 A. No.

13 Q. While we've been talking have you
14 thought of any other matters, investigations
15 that you've worked on at TDS that have resulted
16 in convictions?

17 A. No.

18 Q. The fentanyl one that you mentioned,
19 what was the activity that the person was
20 convicted of? What were they doing with the
21 fentanyl?

22 MR. CLUFF: Objection. Vague.

23 A. Trafficking.

24 Q. So that means --

25 A. Selling.

1 Q. And where were they getting the
2 fentanyl from?

3 A. China.

4 Q. So that was illicit fentanyl?

5 A. That is correct.

6 Q. How many investigations involving
7 illicit fentanyl have you worked on as a TFO?

8 MR. CLUFF: Objection. Vague.

9 A. A few.

10 Q. More than two?

11 A. I think so.

12 Q. More than five?

13 A. No.

14 Q. The investigations that you work on
15 at TDS as a TFO, do some of those investigations
16 involve targets outside the city of Cleveland?

17 MR. BENNETT: You can answer that
18 question yes or no.

19 A. Yes.

20 Q. And do you know what the relative
21 proportion is of investigations you're working
22 on where the target is in Cleveland versus
23 outside of Cleveland, you know, the two to three
24 dozen cases?

25 A. It's some of them.

1 Q. Is one more common than the other,
2 that the target is in Cleveland versus outside
3 of Cleveland?

4 A. Yes.

5 Q. Which is more common?

6 A. More common that the target is
7 inside of Cleveland.

8 Q. And I forgot. Miskiewicz was --

9 A. I'm sorry. May I correct that?

10 Q. Please.

11 A. My explanation as the target is
12 inside of Cleveland means that the activity is
13 taking place in Cleveland, not necessarily that
14 the target lives in Cleveland but that they
15 may -- there's a venue into Cleveland. They
16 either live in Cleveland and may be doing things
17 inside of Cleveland or outside of Cleveland or
18 they live outside of Cleveland but the activity
19 is taking place in Cleveland.

20 Q. And I'm having geographic amnesia
21 about Cleveland, about which I'm embarrassed,
22 but the person who worked at the doctor's office
23 in Parma, is that inside of Cleveland?

24 A. Parma is not inside of Cleveland but
25 much of the activity as far as the prescriptions

1 and the crimes were taking place in Cleveland.

2 Q. Have you ever worked on
3 investigations where the activity was taking
4 place outside the state of Ohio as a TFO?

5 A. Could you explain that; part of the
6 activity, all the activity?

7 Q. Sure.

8 Are there cases where any of the
9 activity is outside the state of Ohio?

10 A. Yes.

11 Q. Are there investigations that you've
12 worked on as a TFO where the primary activity is
13 outside the state of Ohio?

14 MR. BENNETT: Objection. Vague.
15 You can answer yes or no to that
16 question.

17 A. Yes.

18 Q. How many of those?

19 A. A few.

20 Q. Have you worked on investigations
21 where the primary activity is outside the United
22 States?

23 MR. BENNETT: Objection. Vague.

24 You can answer that question yes or
25 no.

1 A. I would say no.

2 Q. And have you worked on any
3 investigations that didn't involve opioids as a
4 TFO?

5 MR. BENNETT: You can answer that
6 yes or no.

7 A. Yes.

8 Q. What types of substances other than
9 opioids?

10 A. The benzodiazepine family as well as
11 steroids, and I believe the methamphetamine
12 family.

13 Q. How many benzo investigations have
14 you worked on as a TFO?

15 A. Investigations where benzos were
16 part of the investigation and typically are
17 with -- investigations typically have multiple
18 -- diversions of multiple classifications.
19 Where benzos were in, it would be numerous.

20 Q. How about where benzos were the
21 focus as opposed to just being in the mix with
22 other stuff?

23 MR. CLUFF: Objection. Vague.

24 MR. BENNETT: Join the objection.
25 Vague.

1 A. Your question is where
2 benzodiazepines were the focus of the
3 investigation?

4 Q. Right.

5 A. That would be zero.

6 Q. Have there been any investigations
7 where steroids were the focus of the
8 investigation that you've worked on as a TFO?

9 MR. CLUFF: Same objection.

10 MR. BENNETT: I'll join that
11 objection.

12 A. My understanding of focus is that --
13 is it -- you're meaning was the main drug
14 involved?

15 Q. Sure.

16 A. That would be zero.

17 Q. And so have there been any
18 investigations that you've worked on as a TFO
19 where the focus was on something other than an
20 opioid?

21 MR. CLUFF: Same objection. Asked
22 and answered.

23 MR. BENNETT: Join the objection.
24 Vague.

25 A. I don't believe so.

1 Q. Have you worked on any
2 investigations involving carfentanil as a TFO?

3 A. I'm not sure. I'm not sure because
4 it has to be tested. To come back carfentanil
5 is different than fentanyl.

6 Q. Is there a particular type of
7 investigation that -- do you focus on one kind
8 or kinds of investigations more than others as a
9 TFO? And by kinds I mean where you didn't do
10 doctor shopping but your focus is on forgery
11 cases as opposed to overprescribing cases or
12 anything like that.

13 A. No.

14 Q. Just whatever they tell you to do,
15 you work on?

16 A. Yes.

17 Q. Are there specialists within the TDS
18 for particular types of investigations?

19 MR. CLUFF: Objection. Vague.
20 Lacks foundation to show personal knowledge.
21 Might want to check with your authorization to
22 see if you can answer that question.

23 MR. BENNETT: You can answer that
24 question yes or no if you know, but I will join
25 the objection, vague.

1 A. I'm a little bit confused by what
2 you mean by specialist. If you mean specialist
3 -- you mean an agent who has a specialty in this
4 type of drug or this type of investigation, my
5 understanding is the answer would be no.

6 Q. Are there agents at TDS who tend to
7 focus more on, for example, doctor shopping
8 investigations as opposed to other types?

9 MR. CLUFF: Objection. Lacks
10 foundation.

11 MR. BENNETT: Objection. Vague.

12 A. Understanding that I have only been
13 there for such a short period of time, I don't
14 know.

15 Q. The type or has the mix of
16 investigations that you've worked on as a TFO,
17 has that changed at all during your time as a
18 TFO?

19 MR. BENNETT: Objection.

20 A. No.

21 MR. BENNETT: Objection. Vague.
22 You can answer.

23 MR. CLUFF: It's also compound.

24 Q. We can agree, I hope, Detective
25 Prince, that opioids, prescription opioids

1 anyway, can be prescribed for medical purposes
2 to treat medical needs?

3 MR. CLUFF: Calls for an expert
4 opinion. Beyond the scope.

5 A. What I would agree is that there are
6 experts in the medical field who are allowed to
7 prescribe opioids for medical purposes and that
8 I'm not qualified to make that judgment.

9 Q. Do you think -- if it were up to
10 you, would you change that?

11 MR. CLUFF: Objection. Misstates
12 testimony. Calls for speculation. Lacks
13 foundation.

14 A. I don't understand what I'd be
15 changing.

16 Q. Would you want it so that no doctor
17 could prescribe opioids for medical purposes?

18 MR. CLUFF: Same objection. Asked
19 and answered.

20 A. That's not what I said.

21 Q. I didn't say it's what you said.
22 I'm asking if that's what you would want.

23 A. I believe that what I want is for
24 the system to work as it has been designed, and
25 that if the rules and regulations are followed

1 properly, that it's a good system if it follows
2 the mandates that it has received.

3 Q. As a TFO have you worked on any
4 investigations where the investigation concluded
5 and the decision was made not to bring charges;
6 in other words, you investigated and concluded I
7 don't think there was a crime here?

8 MR. CLUFF: Objection. Compound.

9 MR. BENNETT: Objection. Scope.

10 You can answer that question yes or
11 no only.

12 MR. CLUFF: It's also vague as to
13 conclusions.

14 A. The answer is yes, except that I'm
15 not agreeing with the fact that a crime has not
16 taken place.

17 Q. But you've worked on investigations
18 where the decision was -- the investigation
19 concluded and the decision was made not to bring
20 charges? If I understood correctly, yes, that's
21 happened?

22 A. I've worked on investigations where
23 the information that was gathered or available
24 to investigators did not meet the parameters set
25 by prosecutors for charges to go forward.

1 Q. And did any of those -- the
2 instances where that occurred, did any of those
3 investigations involve improper prescribing as
4 we defined it earlier?

5 MR. CLUFF: Are you still asking him
6 in his capacity as a task force officer?

7 MR. BLOCK: Yes.

8 MR. BENNETT: Objection. Scope.
9 You can answer that question yes or
10 no only.

11 A. No.

12 Q. What type of diversion was involved
13 in the cases where the investigation concluded
14 and a decision was made not to bring charges?

15 MR. BENNETT: Objection. Scope.

16 You are not authorized to disclose
17 non-public facts or information of specific DEA
18 investigations. To the extent that you can
19 answer this question generally or the
20 information was made public, you may answer.

21 A. Based on the instructions I
22 received, I don't think I can answer any
23 further.

24 MR. BLOCK: Your Honor, then I need
25 a ruling on Mr. Bennett's objection, because I

1 don't understand how just the type of
2 investigation -- we don't know who it is, why
3 they didn't investigate it. I just want to know
4 what type of cases has he worked on where they
5 concluded that they weren't going to bring
6 charges.

7 SPECIAL MASTER COHEN: There may be
8 a misunderstanding. Why don't you just ask the
9 question again.

10 MR. BLOCK: Thank you, Your Honor.

11 Q. Can you identify the types -- just
12 the type of case, so, you know, forgery, doctor
13 shopping, improper prescribing? What are the
14 types of cases, investigations that you've
15 worked on where they concluded and the
16 conclusion was not to bring charges?

17 MR. CLUFF: Objection. Compound.

18 MR. BENNETT: Objection. Scope.

19 You may identify the general type of
20 case, but you may not identify the specifics of
21 the investigation. Do you understand my
22 instruction?

23 THE WITNESS: Yes.

24 A. Improper prescribing and, I believe,
25 manufacturing.

1 Q. Like counterfeiting?

2 A. Yes. I'm sorry. I should have said
3 counterfeiting.

4 Q. And do you know how many times
5 that's happened with an improper prescribing
6 investigation that you've worked on and the
7 conclusion was we're not bringing charges?

8 A. I believe once.

9 Q. And how about the counterfeiting?

10 A. One.

11 Q. And can we agree that improper
12 prescribing investigations are time-consuming?

13 MR. CLUFF: Objection. Vague.

14 A. Improper prescribing or, as I call
15 them, trafficking by a prescriber consumes a lot
16 of investigative time, yes.

17 Q. Do you know what -- what's the range
18 of time it takes to complete an improper
19 prescribing investigation?

20 A. I can't give you a range other than
21 to say that every trafficking or complaint
22 regarding a prescriber who may be outside the
23 normal range is very individual and can take a
24 long time or it can kind of fall into place
25 fairly quickly. Typically, though, it takes a

1 longer time and is governed more by the guidance
2 received by a prosecutor.

3 Q. And I'm not limiting this to TDS,
4 but in an improper prescribing investigation,
5 what's the quickest you've ever been able to
6 complete one of those that you've worked on?

7 A. Now we're talking about --

8 Q. Ever.

9 A. -- as a Cleveland narcotics
10 detective also?

11 Q. Either/or. Yeah. I don't know
12 which one would be quicker.

13 MR. CLUFF: You also specified you.
14 Do you want cases where he's been lead or cases
15 that he's ever worked on?

16 A. So how long was the fastest improper
17 prescriber case? That would be a couple of
18 months.

19 Q. And a couple of months would be the
20 exception?

21 A. Yes.

22 Q. And it wouldn't be unusual for these
23 cases to take years?

24 MR. CLUFF: Objection. Calls for
25 speculation. Vague.

1 A. Some of the cases that I worked on
2 have taken several years.

3 Q. The improper prescribing
4 investigations --

5 A. If you don't mind, if I could get
6 some water.

7 Q. Yes, absolutely.

8 (Recess had.)

9 Q. Detective Prince, I want to focus on
10 the improper prescribing investigations that
11 you've worked on as a TFO. I call them improper
12 prescribing. I think you called it doctor
13 trafficking.

14 A. Trafficking, yes.

15 Q. Have there been any of those
16 investigations that you've worked on that didn't
17 involve some sort of consultation with a medical
18 expert?

19 MR. CLUFF: Objection. Vague as to
20 time.

21 MR. BENNETT: Objection. Scope.
22 You can answer yes or no.

23 A. Any that did not involve some sort
24 of consultation -- I don't believe so.

25 Q. So a medical expert is consulted in

1 all of these type of investigations that you've
2 worked on?

3 MR. BENNETT: Objection. Scope.
4 You can answer yes or no.

5 A. Yes.

6 Q. Do you use OARRS in connection with
7 improper prescribing investigations as a TFO?

8 A. OARRS is used, yes.

9 Q. Can you think of any improper
10 prescribing investigation you've worked on as a
11 TFO where OARRS was not used?

12 MR. BENNETT: Objection. Vague.
13 You can answer.

14 A. I cannot think of any investigation
15 where it wasn't used.

16 Q. Can you think of any investigation
17 into improper prescribing that you've worked on
18 as a TFO where there wasn't some form of
19 undercover work done?

20 MR. CLUFF: Objection. Vague.

21 MR. BENNETT: Objection. Scope.
22 You may answer that yes or no only.

23 A. Yes.

24 Q. How many investigations into
25 improper prescribing where there was no

1 undercover work?

2 A. I see you say as a TFO.

3 Q. Yes.

4 A. So the answer is no.

5 Q. So all the ones as a TFO have
6 involved some sort of undercover work, have
7 included some sort of undercover work?

8 MR. BENNETT: You can answer that
9 yes or no only.

10 A. Yes.

11 Q. And do you use ARCOS as a TFO?

12 MR. BENNETT: Objection. Vague.

13 A. [REDACTED]

14 Q. Do you know whether ARCOS is used in
15 connection with any of the investigations that
16 you've worked on as a TFO?

17 A. [REDACTED]

18 [REDACTED]

19 Q. And do you know at a very general
20 level what's ARCOS used for in connection with
21 investigations?

22 MR. CLUFF: Hold on.

23 MR. BENNETT: He can answer that
24 question from the DEA's perspective if he knows.

25 A. I don't know.

1 Q. Do you have an understanding of who
2 at the TDS uses the ARCOS data?

3 MR. BENNETT: Objection.

4 You may state a title but not an
5 actual person.

6 A. [REDACTED].

7 Q. Investigations that you work on as
8 the TFO where prescription medications are
9 seized or otherwise obtained in the course of
10 the investigation, do you track which
11 manufacturer, which specific manufacturer it was
12 that made the pills that you're getting?

13 MR. CLUFF: Objection. Compound and
14 vague.

15 MR. BENNETT: You can answer that
16 question if you know.

17 A. I don't believe so.

18 Q. Why not?

19 A. I don't know.

20 Q. As a TFO have you done any
21 investigations into conduct of a sales
22 representative for a pharmaceutical
23 manufacturer?

24 MR. BENNETT: Objection. Scope.

25 You can answer that question yes or

1 no only.

2 A. No.

3 Q. We'll start with a yes or no to
4 this, please. Are there any databases that you
5 have access to at TDS that you didn't have
6 access to as a City of Cleveland police
7 detective?

8 MR. CLUFF: Objection. Vague as to
9 databases.

10 MR. BENNETT: You can answer that
11 yes or no only. You may not identify any
12 non-public databases or information sources that
13 you can access, but you can answer yes or no.

14 A. Yes.

15 Q. And I guess I should have specified
16 a little bit more. We're talking about
17 databases that are useful in terms of
18 investigating diversion that you had access to
19 at TDS that you didn't have before you were --
20 I'll spit it out again.

21 Are there any databases that you
22 have access to as a TFO that are useful for
23 investigating diversion that you didn't have
24 access to before you became a TFO at the TDS?

25 MR. CLUFF: Objection. Vague.

1 Calls for opinion.

2 MR. BENNETT: Objection. Vague.

3 Objection. Scope.

4 You may answer that yes or no only
5 but you may not identify any non-public
6 databases.

7 A. Yes.

8 Q. Are the names of any of those
9 databases public knowledge?

10 MR. BENNETT: You can answer that.

11 A. I don't know.

12 MR. BENNETT: Would you like us to
13 review with him what he's referring to and let
14 you know what he can and can't cite?

15 MR. BLOCK: Yes.

16 (Recess had.)

17 MR. BENNETT: I think he's ready to
18 answer your question. He's been instructed on
19 what information he can give.

20 Q. So please share with us.

21 A. So I have access, as a TFO officer,
22 to ARCOS and to the DEA registrar's information.

23 Q. And can you say generally how is the
24 DEA registrar's information -- how can that be
25 helpful for a diversion investigation?

1 MR. BENNETT: You can answer that
2 generally.

3 A. For one thing, generally, it
4 establishes if the person has a registered DEA
5 number.

6 Q. And so if somebody is dealing with
7 prescription medications that are controlled
8 substances and they don't have a DEA
9 registration number, that's a suggestion that
10 something might be amiss?

11 A. That would suggest that there's
12 another direction that the investigation should
13 go.

14 Q. Would that stay within TDS, though,
15 if that were the fact pattern, or do you mean it
16 goes off to a different department to work on?

17 MR. BENNETT: Objection. Calls for
18 speculation. Incomplete hypothetical.

19 To the extent you can answer it
20 generally with information you have, you may,
21 whether it would stay within TDS or go somewhere
22 else.

23 A. If it were dealing with the
24 diversion of prescription drugs, it would stay
25 within TDS.

1 Q. And at a general level, how is ARCOS
2 data helpful for diversion investigations?

3 A. [REDACTED]
4 [REDACTED]
5 [REDACTED]

6 Q. As a TFO, have you ever initiated an
7 investigation into potential overprescribing
8 solely on the basis of the quantity of
9 medications that the physician was prescribing?

10 MR. CLUFF: Objection. Vague.
11 Lacks foundation.

12 MR. BENNETT: Objection. Vague.
13 You can answer that question yes or
14 no.

15 A. No.

16 Q. And as a TFO, have you ever
17 initiated any investigation into diversion based
18 solely on the quantity of medication, whether
19 that's medication being prescribed, medication
20 being dispensed?

21 MR. CLUFF: Same objections and
22 assumes facts.

23 MR. BENNETT: Same objection. Same
24 instruction.

25 You can answer yes or no only.

1 A. No.

2 Q. Why not?

3 MR. BENNETT: Objection. Scope.

4 You are not authorized to disclose
5 the internal deliberative process of the
6 Department of Justice. To the extent you can
7 answer the question without disclosing the
8 internal deliberative process or disclosing
9 matters of prosecutorial discretion, you may
10 answer.

11 A. The way we receive complaints is
12 multi-tiered, and that's not how -- that's not
13 what we do.

14 Q. Could you tell whether someone is
15 diverting prescription medication looking only
16 at how many prescriptions they're writing?

17 MR. CLUFF: Calls for an expert
18 opinion. Lacks foundation. Vague.

19 MR. BENNETT: Objection. Scope.
20 You can answer if you know.

21 A. Diverting prescription medication --
22 as the question is asked, by diverting, can I
23 tell, sometimes I can tell that a person is
24 diverting because it's a false prescription or a
25 copy or an altered prescription. That is

1 diverting.

2 Q. I'm saying you know Dr. X has
3 written Y number of prescriptions for oxycodone.
4 Do you know whether Dr. X -- just with that
5 information, do you know whether Dr. X is
6 diverting?

7 MR. CLUFF: Incomplete hypothetical.
8 Vague. Assumes facts.

9 A. So as you've proposed this, without
10 a whole lot more information and protocols that
11 we would follow, the answer is no.

12 - - - - -
13 (Thereupon, Deposition Exhibit 28,
14 Two-Page Document Entitled "Police
15 Department, Cleveland, Ohio,
16 Departmental Information," Dated
17 November 4, 2012, Beginning Bates
18 Number CLEVE_002712031, was marked
19 for purposes of identification.)

20 - - - - -
21 Q. I hand you what's been marked as
22 Prince Exhibit 28, which is a two-page document
23 Bates labeled CLEVE_002712031 through 32 from --
24 is there a date on this? This is from November
25 4th, 2012. And the first question is whether

1 you recognize this, sir.

2 A. Yes, sir.

3 Q. And what is this document?

4 A. This is a document that was produced
5 or compiled by myself at the direction of the
6 lead prosecutor handling this investigation.

7 Q. And what information were you
8 reporting?

9 A. At the direction of the county
10 prosecutor, I compiled an amount of work hours
11 that was spent on this investigation.

12 Q. And this is an investigation that
13 resulted in an arrest?

14 MR. CLUFF: Lacks foundation.

15 Q. Do you know?

16 A. The person under investigation was
17 not arrested but was indicted and pled by
18 information.

19 Q. So this resulted in a conviction?

20 A. Yes, it did.

21 Q. Do you remember who the person was?

22 MR. CLUFF: This is during your work
23 as a Cleveland officer, and since it's somebody
24 that's been convicted, you can answer.

25 A. Yes. I believe that this is the

1 Dr. Samuel Nigro investigation.

2 Q. What was the last name again?

3 A. Nigro.

4 MR. CLUFF: Why don't you give the
5 spelling.

6 A. N-i-g-r-o.

7 Q. And what was Dr. Nigro doing wrong?

8 A. He was trafficking in prescription
9 drugs.

10 Q. What kind of doctor was he?

11 A. He was a psychiatrist. That's the
12 M.D., right?

13 Q. Yes.

14 A. Yes.

15 Q. Do you remember where his office
16 was?

17 A. Lakewood, Ohio.

18 Q. And were you the lead detective on
19 the Dr. Nigro case?

20 A. This was a joint investigation with
21 the Ohio Board of Pharmacy. I was the lead
22 Cleveland detective.

23 Q. And he was trafficking, so he was
24 writing prescriptions for people who didn't need
25 the drugs for medical purposes? Is that what

1 you mean by trafficking?

2 MR. CLUFF: Objection. Vague.

3 Misstates testimony.

4 Q. Let me ask it this way: What do you
5 mean by trafficking?

6 A. It was determined during the course
7 of this as well as what he pled to that he was
8 prescribing strong opioid medications as well as
9 combinations of other prescription drugs for
10 purposes that were not seen as valid medical
11 reasons.

12 Q. And am I inferring correctly from
13 this document that the investigation into
14 Dr. Nigro spanned at least three calendar years,
15 '09 -- wait, that's four, '09, '10, '11 and '12,
16 2009, '10, '11 and '12?

17 A. That is correct.

18 Q. The time that's being tracked here,
19 is that the time up to the indictment? This
20 isn't including time spent testifying at trial
21 or anything like that is what I'm getting at.

22 MR. CLUFF: Objection. Compound.

23 A. This did not include time spent in
24 trial, but it may have included time that was
25 necessary to prepare the case for trial as far

1 as organizing, compiling and obtaining all the
2 evidence that was requested or the guidance that
3 we received from the prosecutor.

4 Q. And the hours that are reflected,
5 are those total working hours or are those just
6 overtime hours on the case?

7 A. Total working hours.

8 Q. And the amount of time that was
9 spent -- Dr. Nigro, was that a typical
10 overprescribing investigation in terms of the
11 number of hours that were involved?

12 A. I think it's fair to say that I
13 don't think any of them are typical. This was
14 a -- a large investigation.

15 Q. Was it the largest one you've ever
16 worked on?

17 MR. CLUFF: Objection. Vague.

18 A. I'm not exactly sure how you
19 determine what largest means.

20 Q. Your prior answer was this was a
21 large investigation, so based on whatever you
22 had in your mind when you said that.

23 A. As far as the amount of
24 prescriptions that were identified, I believe
25 this was.

1 Q. And was this the longest
2 investigation that you've ever worked on?

3 MR. CLUFF: Objection. Vague.

4 Q. By investigation, I mean
5 investigation for overprescribing.

6 MR. CLUFF: Same objection.

7 A. Do you mean longest as from start to
8 its conclusion?

9 Q. Sure.

10 A. I don't believe so.

11 Q. And the amount of hours that were
12 spent on the Dr. Nigro investigation, how does
13 that compare to the amount of hours you spend on
14 an overprescribing investigation as a TFO?

15 MR. CLUFF: Objection. Vague.
16 Compound.

17 A. I think that for one thing, it's
18 almost trying to compare apples and oranges.

19 Q. Let's compare apples to apples. For
20 one year, take the amount of hours you spend on
21 Dr. Nigro in a year compared to the amount of
22 hours you spend on any overprescribing
23 investigation as a TFO.

24 MR. CLUFF: Objection. Vague.
25 Compound. It's also an incomplete hypothetical.

1 A. It's very difficult for me to
2 compare this as to me being a TFO. As a TFO, I
3 have more resources, other investigators that
4 would be doing a lot of this work. At this
5 point in time, this investigation -- I was very
6 limited in resources and was doing the bulk of
7 the work.

8 Q. And so then do you know -- all
9 right. Strike that.

10 You said you worked on this case
11 with the Board of Pharmacy, the Dr. Nigro case?

12 A. Ohio Board of Pharmacy.

13 Q. Have you worked with the Ohio Board
14 of Pharmacy in any of your TFO cases?

15 A. Yes.

16 Q. How many?

17 A. I'm aware they have been a joint
18 partner in numerous investigations.

19 Q. Of the ones you've worked on, do you
20 know how many of the investigations you've
21 worked on that the Board of Pharmacy has been
22 involved?

23 A. I can guess that it's more than
24 several.

25 Q. Is there a particular type of

1 investigation where the Board of Pharmacy gets
2 involved, type or types I suppose?

3 A. Yes.

4 Q. Which kinds?

5 A. What you are calling --

6 Q. Overprescribing?

7 A. Yes.

8 Q. Any others?

9 A. The overprescribing seems -- or
10 the -- somehow it is connected to
11 overprescribing, yes.

12 Q. And in the cases you've worked on as
13 a TFO where the Board of Pharmacy has been
14 involved, which agency has reached out to the
15 other to seek assistance; in other words, at TDS
16 are you reaching out to the board saying we need
17 your help on this or is it the board coming to
18 you and saying we'd like you to look into this?

19 A. To the best of my knowledge, it
20 works both ways.

21 Q. Is one more common than the other?

22 A. I'm not sure.

23 Q. Is the Board of Pharmacy involved in
24 every overprescribing case that you've worked on
25 as a TFO?

1 A. Yes, I believe so.

2 Q. Is the Board of Pharmacy proactive
3 in trying to combat diversion?

4 MR. BENNETT: Objection.

5 You are not authorized to disclose
6 non-public facts you've acquired in the
7 performance of your duties as a TFO. To the
8 extent you have an opinion that are based on
9 public facts or facts you acquired outside the
10 performance of your duties as a TFO, you may
11 answer in your personal capacity but not on
12 behalf of the DEA.

13 MR. CLUFF: I also object that it
14 lacks foundation to show personal knowledge
15 about the board's activities and stance on
16 diversion.

17 A. In an investigation of an
18 over-prescriber, the Board of Pharmacy is the
19 agency that also governs the -- some
20 prescribing, licensing and things like that, so
21 that as part of the typical protocol in this
22 type of an investigation, you always contact and
23 reach out to them as well as the fact that they
24 also bring additional resources that would be
25 necessary in this type of investigation.

1 Q. How about the Ohio Medical Board; is
2 the Ohio Medical Board involved in
3 overprescribing investigations?

4 MR. CLUFF: Objection. Vague.

5 A. Yes.

6 Q. And the overprescribing
7 investigations that you've worked on as a TFO,
8 have there been any of those that have not
9 involved the Ohio Medical Board?

10 A. Yes.

11 Q. How many?

12 A. I'm not sure.

13 Q. What's the line of demarcation
14 between whether the medical board gets involved
15 or not?

16 MR. CLUFF: Objection. Lacks
17 foundation.

18 MR. BENNETT: Objection. Vague.

19 You can answer.

20 A. The medical board had a change of
21 how they operated. I can't remember when, but
22 initially they were not contacted but -- I can't
23 remember what year. Since then it has been part
24 of the protocol that has been kind of enacted
25 that the medical board is also contacted.

1 Q. As a TFO, when you started in 2018,
2 were you contacting the medical board on
3 investigations into overprescribing, or that's
4 been a change that's happened during the course
5 of your work on the TDS?

6 MR. CLUFF: Objection. Compound.

7 A. My answer to this question moved to
8 way earlier than I was a TFO. As a TFO, I think
9 it's fair to say that cooperation with the
10 medical board is substantial.

11 Q. As a TFO -- are there any
12 overprescribing cases you've worked on as a TFO
13 that have not involved the medical board?

14 A. Not that I recall.

15 Q. And is the medical board proactive
16 in trying to combat diversion?

17 MR. CLUFF: Objection. Calls for
18 speculation. Vague.

19 MR. BENNETT: Objection. Scope.
20 Same instructions regarding opinions.

21 You may give a personal opinion that
22 is not based on non-public information, but you
23 are not speaking on behalf of the DEA.

24 MR. CLUFF: Or the City of
25 Cleveland.

1 A. I believe it's part of their
2 mandate.

3 Q. Do you find it to actually be the
4 case in your experience with them?

5 MR. CLUFF: Same objection.

6 A. Yes.

7 - - - - -

8 (Thereupon, Deposition Exhibit 29,
9 E-Mail String Beginning Bates Number
10 CLEVE_002518554, was marked for
11 purposes of identification.)

12 - - - - -

13 Q. Let's go to 29. Deposition Exhibit
14 29 is an e-mail chain. The most recent in time
15 is an e-mail from you to Trey Edwards at --
16 you'll tell me what agency Mr. Edwards worked at
17 -- dated January 19, 2017. It bears the Bates
18 numbers CLEVE_002518554 through 18556.

19 The first question, Detective
20 Prince, is, is this an e-mail exchange that you
21 had with Mr. Edwards in the regular course of
22 your duties as a City of Cleveland police
23 detective?

24 A. Yes.

25 Q. And who is Mr. Edwards?

1 A. He's a Board of Pharmacy agent.

2 Q. That's the Ohio Board of Pharmacy?

3 A. That is correct.

4 Q. And he makes a reference to "Now
5 that Mudra is retiring."

6 Do you see that?

7 A. Sure. Mudra.

8 Q. Who is that in reference to?

9 A. That was a senior Board of Pharmacy
10 agent.

11 Q. Did you work with Mr. Mudra?

12 A. Yes.

13 Q. So he's asking who's going to -- I'm
14 sorry. What did you understand him to be asking
15 you when he said, "Now that Mudra is retiring,
16 which one is taking his place," with the winky
17 emoji following?

18 A. He was asking if I was going to
19 apply for his position and join the Board of
20 Pharmacy I'm sure.

21 Q. Is that a job you would want?

22 A. Not anymore.

23 Q. What do you mean by that?

24 A. I'm happy with getting ready for
25 retirement.

1 Q. Is it a job you considered back in
2 January of 2017?

3 A. I believe I was, yes.

4 Q. And you say, "Who do you want. I
5 hear Cleveland guys have a bad rep after"
6 something. Do you know what you were referring
7 to there, what you meant by Cleveland guys
8 having a bad rep?

9 A. I believe that a former Cleveland
10 police officer had applied for a position with
11 the Board of Pharmacy and did not receive that
12 position and that there were some issues with
13 his performance or something. I think that's
14 what we were talking about.

15 Q. Was this a Cleveland police officer
16 who was doing something illegal?

17 A. I don't believe so.

18 Q. Just deficient?

19 A. I don't know.

20 Q. Is it fair to say that the --
21 separate from whether or not you were going to
22 replace -- was it officer -- Mr. Mudra?

23 A. Agent Mudra.

24 Q. Before that conversation, there was
25 some information that Mr. Edwards was passing on

1 to you, a tip about potential diversion
2 activity; is that right?

3 A. Briefly looking over this, it looks
4 as though he received some type of formal
5 complaint from UH Strongsville Urgent Care may
6 have had -- been diverted scripts, or something
7 like that, and that those prescriptions had
8 shown up at a Rite-Aid.

9 Q. And it was someone at the Rite-Aid
10 that was reporting this?

11 A. From what I gather from just briefly
12 looking over this, that seems to be correct.

13 Q. And so that would be an example of a
14 pharmacist and/or a pharmacy helping law
15 enforcement in an investigation?

16 A. This would be an example of a
17 pharmacist or pharmacy reporting the diversion
18 or fraudulent prescriptions as they are mandated
19 by reporting felonies in the state of Ohio, yes.

20 Q. And do you know whether there was an
21 investigation opened up as a result of this?

22 A. I don't know. I can't tell.

23 Q. Have you ever sought assistance from
24 a licensed distributor of pharmaceuticals in
25 connection with any investigation?

1 MR. CLUFF: Objection. Vague.

2 A. I really don't --

3 MR. BENNETT: Objection. Scope.

4 You may answer that question yes or
5 no only.

6 MR. CLUFF: Do you understand the
7 question?

8 THE WITNESS: No. That's my
9 problem. I don't understand --

10 MR. CLUFF: You can ask him to
11 rephrase it.

12 A. I don't understand what a licensed
13 distributor -- if you could explain that,
14 please.

15 Q. An entity that has a license to
16 purchase controlled substances from a
17 manufacturer and then ship them to pharmacies.

18 A. I think in one of my previous
19 depositions we talked about that I did ask
20 for -- we got some assistance from Purdue
21 regarding some dummies. At least that's what we
22 called them. If that counts as a yes, then
23 that's a yes. As far as asking, again, a
24 distributor, at least my understanding of the
25 way you explained it, I believe the answer is

1 no.

2 Q. And Purdue is a company that makes
3 prescription medications?

4 A. Yes. And as I recall, I think we --
5 in that deposition we got into Percocet was
6 Endo. Was that correct? I think so.

7 Q. Have you ever -- so I was going to
8 ask you, have you ever sought assistance from a
9 licensed manufacturer of prescription opioids
10 for assistance in any diversion investigation?

11 MR. CLUFF: Same objections.

12 MR. BENNETT: Objection. Scope.

13 Same instruction. You may answer
14 that question yes or no only.

15 A. Just so I'm clear, this is as a TFO,
16 as a Cleveland police officer?

17 Q. Ever.

18 A. Ever. I think -- did I just answer
19 that by saying when we asked Purdue for
20 assistance, the answer -- does that follow as a
21 licensed manufacturer. If asking them for
22 dummies and things is asking them for
23 assistance, the answer is yes.

24 Q. And was the assistance provided?

25 A. I believe so.

1 Q. And so Purdue is a manufacturer, so
2 you're not -- if I'm following, you're not aware
3 of asking a licensed distributor for any
4 assistance with a diversion investigation?

5 MR. CLUFF: Asked and answered.

6 A. I believe I said no to that.

7 Q. And why haven't you?

8 MR. BENNETT: Objection. Scope.
9 Calls for the internal deliberative process and
10 confidential investigatory techniques.

11 To the extent you can answer without
12 disclosing those, you may answer.

13 A. As to why we never asked, it's
14 because, to the best of my knowledge, an
15 investigation that -- investigations that we
16 were working on didn't need that assistance at
17 that time, not to mention that I'm having a very
18 difficult time understanding what a
19 distributor -- how they would have assisted us.

20 MR. BLOCK: Do any other counsel
21 have questions? I think that that is all the
22 questions I have for Detective Prince, unless
23 your counsel has redirect.

24 MR. CLUFF: I don't.

25 MR. BLOCK: Oh, Josh stepped out.

1 (Short recess had.)

2 MR. BLOCK: I think we're done.

3 MR. CLUFF: As long as we don't have
4 to bring Detective Prince back for a fourth
5 round. So waived or --

6 SPECIAL MASTER COHEN: Waived.

7

8 (Deposition concluded at 3:19 p.m.)

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1 Whereupon, counsel was requested to give
2 instruction regarding the witness' review of
3 the transcript pursuant to the Civil Rules.

4

5 SIGNATURE:

6 Transcript review was requested pursuant to
7 the applicable Rules of Civil Procedure.

8

9 TRANSCRIPT DELIVERY:

10 Counsel was requested to give instruction
11 regarding delivery date of transcript.

12

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REPORTER'S CERTIFICATE

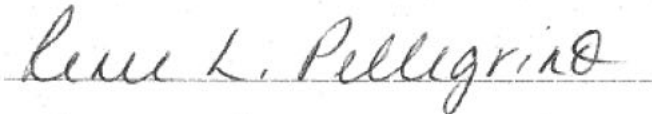
The State of Ohio,)
) SS:
County of Cuyahoga.)

I, Renee L. Pellegrino, a Notary Public within and for the State of Ohio, duly commissioned and qualified, do hereby certify that the within named witness, JOHN PRINCE, was by me first duly sworn to testify the truth, the whole truth and nothing but the truth in the cause aforesaid; that the testimony then given by the above referenced witness was by me reduced to stenotypy in the presence of said witness; afterwards transcribed, and that the foregoing is a true and correct transcription of the testimony so given by the above referenced witness.

I do further certify that this deposition was taken at the time and place in the foregoing caption specified and was completed without adjournment.

1 I do further certify that I am not a
2 relative, counsel or attorney for either party,
3 or otherwise interested in the event of this
4 action.

5 IN WITNESS WHEREOF, I have hereunto set
6 my hand and affixed my seal of office at
7 Cleveland, Ohio, on this 29th day of May, 2019.
8
9
10

11 
12

13 Renee L. Pellegrino, Notary Public
14 within and for the State of Ohio
15

16 My commission expires October 12, 2020.
17
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24
25

Veritext Legal Solutions
1100 Superior Ave
Suite 1820
Cleveland, Ohio 44114
Phone: 216-523-1313

May 29, 2019

To: Sterling Cluff

Case Name: In Re: National Prescription Opiate Litigation v.

Veritext Reference Number: 3389774

Witness: John Prince , Vol III Deposition Date: 5/23/2019

Dear Sir/Madam:

Enclosed please find a deposition transcript. Please have the witness review the transcript and note any changes or corrections on the included errata sheet, indicating the page, line number, change, and the reason for the change. Have the witness' signature notarized and forward the completed page(s) back to us at the Production address shown above, or email to production-midwest@veritext.com.

If the errata is not returned within thirty days of your receipt of this letter, the reading and signing will be deemed waived.

Sincerely,
Production Department

NO NOTARY REQUIRED IN CA

DEPOSITION REVIEW
CERTIFICATION OF WITNESS

ASSIGNMENT REFERENCE NO: 3389774

CASE NAME: In Re: National Prescription Opiate Litigation v.

DATE OF DEPOSITION: 5/23/2019

WITNESS' NAME: John Prince , Vol III

In accordance with the Rules of Civil
Procedure, I have read the entire transcript of
my testimony or it has been read to me.

I have made no changes to the testimony
as transcribed by the court reporter.

Date John Prince , Vol III

Sworn to and subscribed before me, a
Notary Public in and for the State and County,
the referenced witness did personally appear
and acknowledge that:

They have read the transcript;

They signed the foregoing Sworn
Statement; and

Their execution of this Statement is of
their free act and deed.

I have affixed my name and official seal

this _____ day of _____, 20____.

Notary Public

Commission Expiration Date

DEPOSITION REVIEW
CERTIFICATION OF WITNESS

ASSIGNMENT REFERENCE NO: 3389774

CASE NAME: In Re: National Prescription Opiate Litigation v.

DATE OF DEPOSITION: 5/23/2019

WITNESS' NAME: John Prince , Vol III

In accordance with the Rules of Civil Procedure, I have read the entire transcript of my testimony or it has been read to me.

I have listed my changes on the attached Errata Sheet, listing page and line numbers as well as the reason(s) for the change(s).

I request that these changes be entered as part of the record of my testimony.

I have executed the Errata Sheet, as well as this Certificate, and request and authorize that both be appended to the transcript of my testimony and be incorporated therein.

Date John Prince , Vol III

Sworn to and subscribed before me, a Notary Public in and for the State and County, the referenced witness did personally appear and acknowledge that:

They have read the transcript;
They have listed all of their corrections
in the appended Errata Sheet;
They signed the foregoing Sworn
Statement; and
Their execution of this Statement is of
their free act and deed.

I have affixed my name and official seal
this _____ day of _____, 20____.

Notary Public

Commission Expiration Date

ERRATA SHEET

VERITEXT LEGAL SOLUTIONS MIDWEST

ASSIGNMENT NO: 3389774

PAGE/LINE (S)	CHANGE	/REASON
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Date John Prince , Vol III

SUBSCRIBED AND SWORN TO BEFORE ME THIS

DAY OF _____, 20____.

Notary Public

Commission Expiration Date

[& - 48226]

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

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